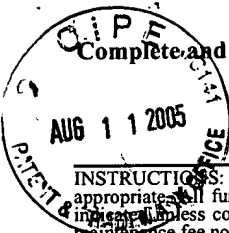


08-12-05
PART B - FEE(S) TRANSMITTAL

"Express Mail" Mailing Label
No. EL637096502US



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated, unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 05/13/2005

TALIVALDIS CEPURITIS
OLSON & HIERL
20 NORTH WACKER DRIVE 36TH FLOOR
CHICAGO, IL 60606

08/15/2005 MBELETE2 00000116 09171697

01 FC:2501 700.00 DP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

09/171,697 10/23/1998 BORIS TABAKOFF TBK-102-US 8351

TITLE OF INVENTION: COMPOUNDS, COMPOSITIONS AND METHOD SUITABLE FOR AMELIORATION OF WITHDRAWAL SYNDROMES AND WITHDRAWAL-INDUCED BRAIN DAMAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional ~~NO~~ YES ~~\$1400~~ \$700 \$0 ~~\$1400~~ \$700 08/15/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

HUANG, EVELYN MEI 1625 514-313000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 1 OLSON & HIERL, LTD.
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lohocla Research Corporation

Denver, Colorado

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0508 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Talivaldis Cepuritis

Date August 11, 2005

Typed or printed name Talivaldis Cepuritis

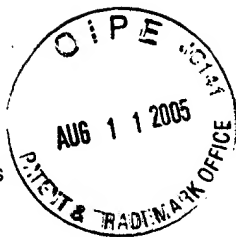
Registration No. 20,818

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

MICHAEL A. HIERL
ARNE M. OLSON
DOLORES T. KENNEY
TALIVALDIS CEPURITIS
KATHRYN E. GARIPAY
JOSEPH M. KUO

MARTIN J. CORN
DENNIS H. MA
RICHARD A. JANNEY
BRUCE R. MANSFIELD



LAW OFFICES OF
OLSON & HIERL, LTD.
20 NORTH WACKER DRIVE
36TH FLOOR
CHICAGO, ILLINOIS 60606
(312) 580-1180
FACSIMILE (312) 580-1189
firm@olsonhierl.com

"Express Mail" Mailing Label
No. EL637096502US

PATENTS
TRADEMARKS
& RELATED MATTERS

SEYMOUR ROTHSTEIN
OF COUNSEL

ROBERT J. ROSS, Ph.D.
PATENT AGENT

August 11, 2005

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Re: Patent Appln. of: Boris Tabakoff et al.
Application No. 09/171,697
Filing Date: 10/23/1998

Dear Sir:

Transmitted herewith is the Issue Fee for the above-identified patent application together with Patent Office Form No. PTOL-85 Part B. The amount of Issue Fee being transmitted is \$700.00.

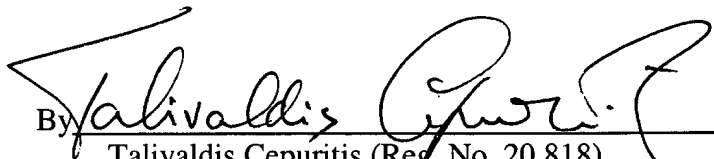
Change in Entity Status: Applicants claim SMALL ENTITY status. 37 CFR 1.27.

Please charge any additional fees concerning this matter to our Deposit Account No.

15-0508.

Very truly yours,

OLSON & HIERL, LTD.

By 
Talivaldis Cepuritis (Reg. No. 20,818)

TC:psz
Enclosures